

## The Public Service Commission State of South Carolina

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Jocelyn Boyd Chief Clerk/Administrator Phone: (803) 896-5133 Fax: (803) 896-5246 April 24, 2018

Clerk's Office Phone: (803) 896-5100 Fax: (803) 896-5199

Reid Price 1105 May Oak Circle Columbia, SC 29229

Dear Mr. Price:

This is to acknowledge receipt of your Letter of Protest/Comments to the Public Service Commission of South Carolina. Your Letter of Protest/Comments will be placed in the Protest File of the Docket listed below and on the Commission's Website at <a href="https://www.psc.sc.gov">www.psc.sc.gov</a>.

 Docket No. 2017-228-S - Application of Palmetto Utilities, Incorporated for Adjustment of Rates and Charges for Customers in the Palmetto Utilities and Palmetto of Richland County Service Areas

You can follow this Docket and other daily filings made at the Commission by subscribing to the Commission's Email Subscriptions at this link: <a href="https://dms.psc.sc.gov/Web/Email">https://dms.psc.sc.gov/Web/Email</a>; or you can also follow Docket No. 2017-228-S at this link: <a href="https://dms.psc.sc.gov/Web/Dockets/Detail/116386">https://dms.psc.sc.gov/Web/Dockets/Detail/116386</a>.

If we may be of further assistance to you, please do not hesitate to contact us.

Sincerely,

Clerk's Office
Public Service Commission of South Carolina

Sign up for Meeting Agenda Alerts: Text PSCAGENDAS to 39492

Complete Form, Print, Sign and Mail to:

Public Service Commission of South Carolina 101 Executive Center Dr., Suite 100 Columbia, SC 29210



**Individual Complaint Form** 

2017-228-5

275779

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To receive an alert when Meeting Agendas are released

| Date*: 04/24/201   | 8  | -  |                   |                           | 3                  | APR 2 5 2018   |                                     |        |  |
|--|--|--|-------------------|---------------------------|--------------------|--|-------------------------------------|--------|--|
| Complainant or l   | Legal Representative                                     | Information:   | * Require         | d Fields                  |                    | APR  | 2000                                |        |  |
| Name *   | Reid Price   |  |                   |                           |                    | M  | AIL DMS                             |        |  |
| Firm (if applicable)   |  |  |                   |                           |                    |  |                                     |        |  |
| Mailing Address *  | 1105 may oak circ  | le   |                   |                           |                    |  |                                     |        |  |
| City, State Zip *  | columbia,sc,29229  |  |                   | Phone *                   |                    |  |                                     |        |  |
| E-mail   |  | ,  |                   |                           | -                  | State of the State |                                     |        |  |
| Name of Utility I  | nvolved in Complain                                      | t: * palmetto  | utilities inc     |                           |                    | April 1990   |                                     |        |  |
| Type of Complain   | nt (check appropriate l                                  | hox helow.) *  |                   |                           |                    |  |                                     |        |  |
| Billing Error/Ac Disconnection of Service Issue Other (be specif | ljustments Dep f Service Payı Met                        | osits and Credit Es<br>ment Arrangements<br>er Issue |                   | Wrong Rate<br>Water Quali |                    |  | sal to Connect S<br>Extension Issue |        |  |
| Have you contacted   | I the Office of Regulato                                 | ory Staff (ORS)? *                                   | Yes No            | Name o                    |                    | ot get na  | me                                  |        |  |
| nothing, i feel to   | apped and so do a  | alot of other pe                                     | eople.            |                           |                    |  |                                     |        |  |
| Relief Requested:  | * (This section must be                                  | e completed. Attach                                  | additional inform | ation to this p           | age if neces       | sary.)   |                                     |        |  |
|  | rease to a reasona<br>, and they want the<br>you that.   |  |                   |                           |                    |  |                                     | ear,   |  |
| ITS CONTENTS O   | BLIC SERVICE COM<br>ON THE COMMISSIO<br>BLIC SCRUTINY OR | N'S WEBSITE (d                                       | ms.psc.sc.gov), A |                           |                    | JCH INFO   |                                     |        |  |
| STATE OF SOUTH   | CAROLINA   | )  | VERIFICA          |                           | Complainant's Sign | nature* (MUST E  | BE SIGNED, DO NOT                   | PRINT) |  |
| COUNTY OF rich   |  | )<br>)   | EMITICA           |                           |                    |  |                                     |        |  |
| Reid Price   |  | verify that I ha                                     | ive read my compl | aint filed on             | 4/24/18            |  | Internal Us                         | e Only |  |
| Compl  | ainant's Name *  | — verify that I ha                                   | ive read my compl |                           | Date               |  | Processed By                        | Date   |  |
| and know the conter  | ts thereof, and that said                                | contents are true                                    | Reid Price        | De: 1                     | de:                | _  |                                     |        |  |

Complainant's Signature \* (MUST BE SIGNED, DO NOT PRINT)

H.E.